

NOTICE OF INTENT

Department of Health and Hospitals Bureau of Health Services Financing

State Children's Health Insurance Program LaCHIP Affordable Plan Benefits Administration (LAC 50:III.Chapter 205)

The Department of Health and Hospitals, Bureau of Health Services Financing proposes to amend LAC 50:III.20501 and §§20505-20507 in the Medical Assistance Program as authorized by R.S. 36:254 and pursuant to Title XXI of the Social Security Act. This proposed Rule is promulgated in accordance with the provisions of the Administrative Procedure Act, R.S. 49:950 et seq.

The Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing adopted provisions to implement phase five of the Louisiana Children's Health Insurance Program (LaCHIP) as a stand-alone program under Title XXI provisions to provide coverage to uninsured children whose family income is from 200 percent up to 250 percent of the Federal Poverty Level (*Louisiana Register*, Volume 34, Number 4).

The department promulgated an Emergency Rule which amended the April 2008 Rule in order to transfer the administration of health care services covered under the LaCHIP Affordable Plan (Phase 5) to the health plans participating in the BAYOU HEALTH Program, and the administration of behavioral health services to the Statewide Management Organization in the Louisiana Behavioral Health Partnership (*Louisiana Register*, Volume 38, Number 12).

This Emergency Rule also revised the cost sharing provisions in order to remove the co-payment, co-insurance, and deductible requirements since they will no longer be attributable to the LaCHIP Affordable Plan Program. Only the monthly premium per household shall apply. This proposed Rule is being promulgated to continue the provisions of the January 1, 2013 Emergency Rule.

Title 50

PUBLIC HEALTH-MEDICAL ASSISTANCE

Part III. Eligibility

Subpart 11. State Children's Health Insurance Program

Chapter 205. Louisiana Children's Health Insurance Program

(LaCHIP) - Phase V

§20501. General Provisions

A. ...

B. The Department retains the oversight and management of this LaCHIP expansion with health care benefits provided through the ~~Louisiana Division of Administration, Office of Group Benefits Preferred Provider Organization (PPO) plan~~BAYOU HEALTH Program and behavioral health services provided through the Louisiana Behavioral Health Partnership (LBHP).

C. Phase five is a cost-sharing program. Families who are enrolled in phase five of LaCHIP will be responsible for paying premiums,~~co-payments and deductibles.~~

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XXI of the Social Security Act.

HISTORICAL NOTE: Repromulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:660 (April 2008), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:

§20505. Covered Services

A. Children covered in phase five of the LaCHIP expansion shall receive health care benefits through ~~the an Office of Group Benefits PPO plan's~~ array of covered services offered by health plans participating in the BAYOU HEALTH Program, and behavioral health services administered by the Statewide Management Organization under the LBHP. The following services shall be included~~including~~:

1. - 8. ...

9. inpatient and outpatient ~~mental~~ behavioral health services other than those listed in any other provisions of §20503:

9.a. - 10. ...

11. nursing care services;

a. ~~the state employee's health plan only covers home health care services coordinated through case management;~~ Repealed.

12. ...

13. inpatient substance abuse treatment services, including residential substance abuse treatment services:

a. ~~these services are only available to children receiving benefits in the state group benefits PPO plan through phase five of LaCHIP.~~ Inpatient admissions must be pre-certified.

Emergency services are covered if, upon review, presentation is determined to be life-threatening, resulting in admission to inpatient, partial hospital or intensive outpatient level of care;

b. ...

14. outpatient substance abuse treatment services:

a. ~~these services are only available to children receiving benefits in the state group benefits PPO plan through phase five of LaCHIP.~~ All services must be pre-certified;

b. ...

15. case management services~~;~~;

a. ~~these services are only available to children receiving benefits in the state group benefits PPO plan through phase five of LaCHIP. Case management services are only available to assist members in transitioning out of an inpatient care setting;~~Repealed.

16. - 16.a. ...

17. hospice care:

a. ~~the state group benefits PPO plan only covers hospice services coordinated through case management;~~Repealed.

18. medical transportation; and~~;~~

a. ~~medical transportation is limited to emergency ambulance services only;~~ Repealed.

19. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XXI of the Social Security Act.

HISTORICAL NOTE: Repromulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:660 (April 2008), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:

§20507. Cost Sharing

A. Phase five of LaCHIP is a cost-sharing program with ~~annual aggregate of premiums, deductibles and co-payments~~ limited to no more than 5 percent of the family's annual income. ~~Families who have been exempted from cost-sharing as members of federally recognized Native American Tribes will not be subject to co-payments.~~

B. The following cost-sharing criteria shall apply.

1. - 1.a. ...

~~2. Deductibles. A \$150 deductible is applicable to hospital emergency room visits. If the child is admitted, the deductible shall be waived. A separate \$200 deductible is applicable to mental health or substance abuse services. Payment of all deductibles is the responsibility of the family.~~

~~3. Co-insurance or co-payments. Enrollees are responsible for paying 10 percent of the contracted rate for most of the covered services rendered, with the exception of the following services:~~

~~a. hospice services require payment of 20 percent of the negotiated rate;~~

~~b. mental health and substance abuse services require payment of 20 percent of the negotiated rate;~~

~~c. home health services require payment of 30 percent of the negotiated rate;~~

~~d. prescription drug services require payment of 50 percent of the negotiated rate or \$50 maximum payment ; and:~~

~~i. after \$1,200 per person per plan year, the enrollee's co-payment shall be \$15 for brand name drugs. There will be no co-payment for generic drugs:~~

~~e. ground ambulance transportation requires a \$50 co-payment and licensed air ambulance transportation requires a \$250 co-payment.~~ 2. - 3.e. Repealed.

C. Non-payment of premiums ~~shall~~ may result in disenrollment from LaCHIP, ~~effective the following month. Non-payment of associated co-insurance or deductibles may result in a provider's refusal to render services, but the recipient will retain LaCHIP coverage.~~ Recipients shall be allowed a 60-day grace period prior to disenrollment for non-payment.

AUTHORITY NOTE: Promulgated in accordance with R.S. 36:254 and Title XXI of the Social Security Act.

HISTORICAL NOTE: Repromulgated by the Department of Health and Hospitals, Office of the Secretary, Bureau of Health Services Financing, LR 34:661 (April 2008), amended by the Department of Health and Hospitals, Bureau of Health Services Financing, LR 41:

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of this proposed Rule on the family has been considered. It is anticipated that this proposed Rule may have a positive impact on family functioning, stability and autonomy as described in R.S. 49:972 by ensuring that families have adequate coordination and access to health care services.

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the poverty impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have a positive impact on child, individual, or family poverty in relation to individual or community asset development as described in R.S. 49:973 by reducing health care costs to families through adequate coordination and access to health care services.

In compliance with House Concurrent Resolution 170 of the 2014 Regular Session of the Louisiana Legislature, the provider impact of this proposed Rule has been considered. It is anticipated that this proposed Rule will have no impact on the

staffing level requirements or qualifications required to provide the same level of service, no direct or indirect cost to the provider to provide the same level of service, and will have no impact on the provider's ability to provide the same level of service as described in HCR 170.

Interested persons may submit written comments to J. Ruth Kennedy, Bureau of Health Services Financing, P.O. Box 91030, Baton Rouge, LA 70821-9030 or by email to MedicaidPolicy@la.gov. Ms. Kennedy is responsible for responding to inquiries regarding this proposed Rule. A public hearing on this proposed Rule is scheduled for Thursday, May 28, 2015 at 9:30 a.m. in Room 118, Bienville Building, 628 North Fourth Street, Baton Rouge, LA. At that time all interested persons will be afforded an opportunity to submit data, views or arguments either orally or in writing. The deadline for receipt of all written comments is 4:30 p.m. on the next business day following the public hearing.

Kathy H. Kliebert

Secretary